Attorney Docket No.: CYPR-CD01203M



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE							
Hereby certify that	this transmittal of the below desc and addressed to Commissioner	ribed document is being de or Patents, P.O. Box 1450.	eposited with the United States F Alexandria, VA, 22313-1450, on	ostal Service	in an envelope bearing of deposit.		
Date of 04/4 Deposit:		JOSE S.GARCIA	Signature of the Person Making the Deposit:	Jore	S. Garria		
In re Applicati	on of: Roe et al.						
Serial No.: 10	0/001,477		Examiner: PROCTOR	₹, J.			
Filed: 11/01	11/01/2001 Art Unit: 2123						
Confirmation I	No.: 6440						
For: BREAKE	POINT CONTROL IN A	I IN-CIRCUIT EMU	LATION SYSTEM				
P.O. Box 145	er for Patents 0 /A 22313-1450						
	•	AMENDMENT	TRANSMITTAL				
1. Trans	mitted herewith is an an	nendment for this a	oplication				
(11 Transmit Other:	ted herewith is a respon sheets) ted herewith are cant is other than a sma		n for the above identifi	ed patent	application.		
		Extension	of Term				
3. The p	roceedings herein are fo	or a patent applicati	on and the provisions o	of 37 C.F.F	₹. 1.136 apply.		
(a) [X]	Applicant petitions for (fees: 37 C.F.R. 1.17	an extension of tim (a)-(d) for the total r	ne under 37 C.F.R. 1.10 number of months chec	36 ked below	r:)		
	Extension [X] one mor [] two month [] three mon [] four month	is ths	<u>Fee</u> \$120.00 \$460.00 \$1020.00 \$1,590.00				
If an additiona (b) []	I extension of time is re Applicant believes that being made to provid need for a petition for	at no extension of te e for the possibility	Fee \$ 120 ider this a petition there irm is required. However that applicant has inade	er, this co	nditional petition is verlooked the		
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Fee Calculation

4. ` The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total
Total Claims	18	- 20 =	0	x \$50.00	\$0.00
Independent Claims	3	- 3 =	0	x \$200.00	\$0.00
Multiple Dependent C amendment)	laim Fee (one or mo	ore, first added by	his	\$360.00	\$0.00
Total Fees					\$0.00

PAYMENT OF FEES

- 5. The full fee due in connection with this communication is provided as follows:
- The Commissioner is hereby authorized to charge any fees associated with this [X] communication or credit any overpayment to Deposit Account No.: <u>50-4160</u>. A <u>duplicate copy</u> of this authorization is enclosed.
- A check in the amount of \$ 120 . [X]
- Charge any additional fees required or credit any overpayments associated with [] this filing to Deposit Account No.: 50-4160. A duplicate copy of this authorization is enclosed.

Please direct all correspondence concerning the above-identified application to the following address:

MURABITO HAO & BARNES LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Respectfully submitted,

Attorney Docket No.: CYPR-CD01203M

Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)								
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total			
Total Claims	18	- 20 =	0	x \$50.00	\$0.00			
Independent Claims	3	- 3 =	0	x \$200.00	\$0.00			
Multiple Dependent Claim Fee (one or more, first added by this \$360.00 amendment)								
Total Fees								

PAYMENT OF FEES

- 5. The full fee due in connection with this communication is provided as follows:
- [x] The Commissioner is hereby authorized to charge any fees associated with this communication or credit any overpayment to Deposit Account No.: 50-4160. A duplicate copy of this authorization is enclosed.
- [X] A check in the amount of \$ 120 .
- [] Charge any additional fees required or credit any overpayments associated with this filing to Deposit Account No.: <u>50-4160</u>. A <u>duplicate copy</u> of this authorization is enclosed.

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Respectfully submitted,

Date:

Jose S. Garcia